

Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>NVS4101AGC</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  <b>08/22/2008</b>
NAME OF PROVIDER OR SUPPLIER  <b>LAKE MEAD CARE HOME</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>4325 W LAKE MEAD LAS VEGAS, NV 89108</b>		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
Y 000	<p>Initial Comments</p> <p>This Statement of Deficiencies was generated as a result of the complaint state licensure survey conducted at your facility on August 22, 2008.</p> <p>The survey was conducted using Nevada Administrative Code (NAC) 449, Residential Facility for Groups Regulations, adopted by the Nevada State Board of Health on July 14, 2006.</p> <p>The facility was licensed as a six (6) beds Residential Facility for Groups which provides care to elderly and disabled persons and persons with mental illness, Category II residents.</p> <p>The census at the time of the survey was 4 residents. Four resident files were reviewed and 4 employee files were reviewed.</p> <p>There was one (1) complaint investigated during the survey.</p> <p>Complaint #NV00010475 - substantiated without deficiencies.</p> <p>The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws.</p> <p>The following regulatory deficiencies were identified:</p>	Y 000		
Y 070 SS=C	<p>449.196(1)(f) Qualifications of Caregiver-8 hours training</p> <p>NAC 449.196</p> <p>1. A caregiver of a residential</p>	Y 070		

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TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Y 070	Continued From page 1  facility must: (f) Receive annually not less than 8 hours of training related to providing for the needs of the residents of a residential facility.  This Regulation is not met as evidenced by: Based on record review, the facility failed to ensure 8 hours of training related to providing for the needs of the residents was received annually by 1 of 4 employees.(#2)  Findings include:  Employee #2's (hire date 1/1/05) file did not contain documented evidence of eight hours of annual Caregiver training.  Severity: 1 Scope: 3	Y 070		
Y 177 SS=F	449.209(4)(d) Health and Sanitation-Dirt, Garbage, Refuse  NAC 449.209 4. To the extent practicable, the premises of the facility must be kept free from: (d) Accumulations of dirt, garbage and other refuse.  This Regulation is not met as evidenced by: Based on observation the facility failed to ensure that the premises were clean and well maintained.  Findings include:	Y 177		

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Y 177	Continued From page 2  Two trash cans in the backyard were not covered with lids.  Severity: 2                  Scope: 3	Y 177		
Y 936 SS=D	449.2749(1)(e) Resident file  NAC 449.2749 1. A separate file must be maintained for each resident of a residential facility and retained for at least 5 years after he permanently leaves the facility. The file must be kept locked in a place that is resistant to fire and is protected against unauthorized use. The file must contain all records, letters, assessments, medical information and any other information related to the resident, including without limitation: (e) Evidence of compliance with the provisions of chapter 441A of NRS and the regulations adopted pursuant thereto.  This Regulation is not met as evidenced by: Based on record review and interview, the facility failed to ensure resident files contained all documents as required by NAC 449.2749 and were retained for at least five years after a resident permanently left the facility.  Findings include:  There were no former resident files available at the facility, including a file on Resident #5 (admitted and discharged 12/05).  Interview with the Manager (Employee #3) revealed that the facility had not retained former resident files.  See complaint #NV00010475	Y 936		

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Y 936	Continued From page 3  Severity: 2      Scope: 1	Y 936			
Y1010 SS=F	449.2764(1) MI Training  NAC 449.2764 1. A person who provides care for a resident of a residential facility for persons with mental illnesses shall, within 60 days after he becomes employed at the facility, attend not less than 8 hours of training concerning care for residents who are suffering from mental illnesses.  This Regulation is not met as evidenced by: Based on Record review the facility failed to ensure 1 of 4 employees received the mandatory eight (8) hours of training concerning the care of residents with mental illness. (#2)  The personnel files for employee #2 (hire date 1/1/05) did not contain documented evidence of the mandatory eight (8) hours of training for caregiving to persons with mental illness.  Severity: 2      Scope: 3	Y1010			
YA106 SS=C	449.200(1)(2)(3)Personnel Files  NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include:	YA106			

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YA106	Continued From page 4  (a) The name, address, telephone number and social security number of the employee; (b) The date on which the employee began his employment at the residential facility; (c) Records relating to the training received by the employee; (d) The health certificates required pursuant to chapter 441 of NAC for the employee; (e) Evidence that the references supplied by the employee were checked by the residential facility; and (f) Evidence of compliance with NRS 449.176 to 449.185, inclusive. 2. The personnel file for a caregiver of a residential facility must include, in addition to the information required to subsection 1: (a) A certificate stating that the caregiver is currently certified to perform first aid and cardiopulmonary resuscitation; and (b) Proof that the caregiver is 18 years of age or older. 3. The administrator may keep the personnel files for the facility in a locked cabinet and may, except as otherwise provided in this subsection, restrict access to this cabinet by other employees of this facility. Copies of the documents which are evidence that an employee has been certified to perform first aid and cardiopulmonary resuscitation and that the employee has been tested for tuberculosis must be available for review at all times. The administrator shall make the personnel files available for inspection by the Bureau within 72 hours after the Bureau requests to review the files.	YA106			

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YA106	<p>Continued From page 5</p> <p>This Regulation is not met as evidenced by: Based on record review, the facility failed to ensure employee files were complete for 3 of 4 employees.(#1,#2,#3).</p> <p>Findings include:</p> <p>Employee #1's (hire date 10/1/07) file did not contain evidence of an annual Tuberculin screening.</p> <p>Employee #2's (hire date 1/1/05) file contained a negative Chest X-Ray in 2006. The file did not contain evidence of a positive Tuberculin screening nor did the file contain an annual statement that the employee was free of disease.</p> <p>Employee #3's file (hire date 1/1/05) contained a negative Chest X-Ray in 2008. The file did not contain evidence of a positive Tuberculin screening nor did the file contain an annual statement that the employee was free of disease.</p> <p>Severity: 1              Scope: 3</p>	YA106		

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